U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Michael Leager	COURT CASE NUMBER 07-429-GMS
DEFENDANT Warden Raphael Williams et. al.	TYPE OF PROCESS Complaint

SERVE ► NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Warden Raphael Williams Howard R. Young correctional Institute

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
AT 1301 East 12th street wilmington DE 19809

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Michael Leager #515275
P.O. Box 9561
Wilmington DE 19809

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	3
Check for service on U.S.A.	✓

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold   Fold

Forma Pauperis

Signature of Attorney or other Originator requesting service on behalf of: Michael Leager	☑ PLAINTIFF ☐ DEFENDANT	TELEPHONE NUMBER	DATE 7/26/07

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 15	District to Serve No. 15	Signature of Authorized USMS Deputy or Clerk	Date 12-19-07

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) Anne Carlton Admin Asst	☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 12/20/07 Time 0830 am pm
	Signature of U.S. Marshal or Deputy

Service Fee 45.00	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges 45.00	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS: